## PART B - FEE(S) TRANSMITTAL

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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.								
09/477,764	64 01/04/2000		CHIA-HONG JAN		042390.P5488 9702										
TITLE OF INVENTION: A DEVICE HAVING RECESSED SPACERS FOR IMPROVED SALICIDE RESISSTANCE ON POLYSILICON GATES															
III DE OF MATERIAL															
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE		OTAL FEE(S) DUE	DATE DUE								
nonprovisional	МО	\$1400	\$300	\$0		\$1700	03/14/2007								
EXAMI	NER	ART UNIT	CLASS-SUBCLASS	]											
VU, HU	NG K	2811	257-389000												
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys 1							e Chen								
CPR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.												
								3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
								PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
								(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Intel C	expavation	Santa Clara, adi fornia													
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4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)															
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